



IPW

# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Complete if Known


Application Number	10/734,583
Filing Date	December 15, 2003
First Named Inventor	Hidetoshi ANDOU
Examiner Name	Not Yet Assigned
Group Art Unit	3738
Attorney Docket Number	2923-595

Total Number of Pages in This Submission

## ENCLOSURES (check all that apply)

- |                                                                                                                          |                                                                                         |                                                                                            |
|--------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Fee Transmittal Form                                                                            | <input type="checkbox"/> Assignment Papers                                              | <input type="checkbox"/> After Allowance Communication to Group                            |
| <input type="checkbox"/> Fee Attached                                                                                    | <input type="checkbox"/> Drawing(s)                                                     | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences        |
| <input type="checkbox"/> Amendment                                                                                       | <input type="checkbox"/> Licensing-related Papers                                       | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final                                                                                     | <input type="checkbox"/> Petition                                                       | <input type="checkbox"/> Proprietary Information                                           |
| <input type="checkbox"/> Affidavits/declaration(s)                                                                       | <input type="checkbox"/> Petition to Convert to a Provisional Application               | <input type="checkbox"/> Status Letter                                                     |
| <input type="checkbox"/> Extension of Time Request                                                                       | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):            |
| <input checked="" type="checkbox"/> Supplemental Application Data Sheet and Second Request For Corrected Filing Receipt. | <input type="checkbox"/> Terminal Disclaimer                                            | <b>Copy Updated Filing Receipt as marked in red.</b>                                       |
| <input type="checkbox"/> Information Disclosure Statement                                                                | <input type="checkbox"/> Request for Refund                                             |                                                                                            |
| <input type="checkbox"/> Certified Copy of Priority Document(s)                                                          | <input type="checkbox"/> CD, Number of CD(s)                                            |                                                                                            |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application                                               |                                                                                         |                                                                                            |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53                                             |                                                                                         |                                                                                            |

REMARKS:

SUBMITTED BY		Complete (if applicable)			
NAME AND REG. NUMBER	Steven M. Giovannetti, Reg. No. 51,739				
SIGNATURE		DATE	December 30, 2004	DEPOSIT ACCOUNT USER ID	02-2135